(b) whether Government have taken any action against the culprits after making inquiries into the incident of shutting off the oxygen plant;

(c) if so, the details thereof;

(d) whether Government have ensured that the parents of the hospitalized children remain free from fear and such incident does not recur in future; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Immediately on detection of disruption in oxygen supply for around 4-5 minutes in Kalavati Saran Children's Hospital on 2-6-2002, in the early hours (2.30 A.M.), the oxygen cylinders available in the Wards/ Units were made operational to prevent any casualties. The disruption occurred due to negligence of the pipeline operator on duty in the centralized oxygen supply unit who was found in an inebriated condition. He was immediately placed under suspension. Besides, preliminary enquiry conducted by the Hospital Authorities has found *am prima facie* guilty resulting in departmental enquiry against him.

(d) and (e) To ensure that such incidents do not recur, it has been ensured that spare oxygen cylinders are available in the wards/units for use in any such emergencies of disruption of oxygen supply. Besides, a Chief Medical Officer has been deputed to monitor the functioning of the Manifold Room and to conduct surprise checks even at odd hours.

Options to CGHS beneficiaries

8. DR. ALLADI P. RAJKUMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to consider giving options to CGHS beneficiaries to consult reputed doctors locally and purchase medicines direct instead of visiting CGHS dispensaries where medicines prescribed are not available and doctors generally are not in their seats;

(b) if so, the plans made in this regard; and

(c) if not, the reasons therefor ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) No, Sir. The doctors are always present in the CGHS dispensaries and prescribed medicines are given to the beneficiaries from the dispensaries. The drugs which are not available are procured through local

purchase from the Authorised Local Chemist on individual prescription and supplied to the beneficiaries. In case of emergencies, authority slips are issued to the beneficiaries to enable them to directly procure medicines from the Authorised Local Chemist.

(b) and (c) In view of (a) above, the questions do not arise,

Working of CGHS Dispensaries

9. SHRI YADLAPAll VENKAT RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether working of CGHS dispensaries are not to the satisfaction of the patients;

(b) if so, the details of analysis made in this regard; and

(c) any alternative proposals for CGHS beneficiaries to avail of assistance of local doctors and chemists ?

THE MINISTER £)F STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) No, Sir. In general, the services provided in CGHS dispensaries are up to the satisfaction of the beneficiaries.

Out of 19,48,026 CGHS beneficiaries in Delhi, only 89 complaints have been received during the year 2001, which amounts to 0.0045% of the beneficiaries and this figure is very low.

In the case of CGHS covered cities outside Delhi, 87 complaints were received during the year 2001 out of approximately 23.50 lakhs beneficiaries which amounts to 0.003 per cent of the beneficiaries and this figure is also very low.

(c) No, Sir.

Services of Gynaecologists in Rural PHCs

10. DR. DASARINARAYANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that most of the PHCs in rural areas are manned by male doctors which deters the rural women to disclose their serious diseases in public before the physician;

(b) if so, whether Government propose to provide the services of female Gynaecologists in the rural primary health centres or ensure that PHCs are visited